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FE5AN018

## REPORT OF RECEIPTS **AND DISBURSEMENTS**

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| FORM 3 For An Authorized Committee |                                  | Office Use Only                          |                            |                                |
|------------------------------------|----------------------------------|--|----------------------------|--------------------------------|
| NAME OF<br>COMMITTEE (in full)     | TYPE OR PRINT ▼                  | Example: If typing, type over the lines. | 12FE4M5                    |                                |
| ENZI FOR US SE                     | NATE                             |  |                            | I                              |
|                                    |                                  |  |                            |                                |
|                                    |                                  |  |                            |                                |
| ADDRESS (number and stre           | PO Box 2775                      |  |                            |                                |
| Check if differen                  |                                  |  |                            |                                |
| than previously reported. (ACC)    | Cody                             |  | WY   8241                  | 4-2775                         |
| 2. FEC IDENTIFICATION              | ON NUMBER ▼                      | CITY                                     | STATE A                    | ZIP CODE ▲ STATE ▼ DISTRICT    |
| C C00317503                        |                                  | S THIS NEW (N) OR                        | AMENDED (A)                | WY 00                          |
| 4. TYPE OF REPOR                   | T (Choose One)                   |  |                            |                                |
| (a) Quarterly Report               | (b) 12                           | P-Day PRE-Election Report for the        | he:                        | =                              |
| April 15 Oue                       | rterly Report (Q1)               | Primary (12P)                            | General (12G)              | Runoff (12R)                   |
| ្រ្យ April 15 Qua                  | rterly Report (Q1)               | Convention (12C)                         | Special (12S)              |                                |
| July 15 Quar                       | terly Report (Q2)                |  |                            | *****                          |
| October 15                         | Quarterly Report (Q3)            | lection on                               |                            | in the State of                |
| January 31 N                       | /ear-End Report (YE) (c) 30      | I-Day <b>POST</b> -Election Report for   | the:                       |                                |
|                                    | (5) 60                           | চেক                                      |                            |                                |
| F)                                 |                                  | General (30G)                            | Runoff (30R)               | Special (30S)                  |
| Termination I                      |                                  | lection on                               |                            | in the State of                |
| 5. Covering Period                 | M M / D D / Y Y Y 201            | through                                  | 12 / D / D / T / T / 31    | 2013                           |
| I certify that I have exami        | ned this Report and to the bes   | t of my knowledge and belief it          | is true, correct and corr  | nplete.                        |
| Type or Print Name of Tre          | asurer June Tope                 |  |                            |                                |
| Signature of Treasurer             | June Tope use                    | look                                     | Date O1                    | 23 / 2014                      |
| NOTE: Submission of false,         | erroneous, of incomplete informa | ation may subject the person sign        | ning this Report to the pe | nalties of 2 U.S.C. §437g.     |
| Office                             |                                  |  |                            | EC FORM 2                      |
| Use  <br>  Only                    |                                  |  |                            | EC FORM 3<br>(Revised 02/2003) |